

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000109760

FILED
Feb 23, 2010
Secretary of State

Entity Name: MEDICARE SUPPLEMENT SERVICES, LLC

Current Principal Place of Business:

96112 NORTSHORE DRIVE
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

96112 NORTSHORE DRIVE
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 27-1316597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALA, NESTOR R II
96112 NORTSHORE DRIVE
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SALA, NESTOR R II
Address: 96112 NORTSHORE DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM
Name: DOVER, KEVIN M
Address: 35 HIDDEN LAKES TRAIL
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NESTOR R SALA II

MGRM

02/23/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date